

Application Data Sheet

Application Information

Application number::
Filing Date:: 04/21/04
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: COILED DISPOSABLE HANDCUFFS AND APPARATUS FOR COILING THE SAME
Attorney Docket Number:: 004515-00008
Request for Early Publication?:: NO
Request for Non-Publication?:: NO
Suggested Drawing Figure::
Total Drawing Sheets:: 9
Small Entity?:: YES
Latin name::
Variety denomination name::
Petition included?:: NO
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: NO

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: USA
Status:: Full Capacity
Given Name:: Paul
Middle Name:: D
Family Name:: Starrett
Name Suffix::
City of Residence::
State or Province of Residence::
Country of Residence:: USA
Street of mailing address:: Thorndike Pd
City of mailing address:: Jaffrey
State or Province of mailing address:: NH
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 03452

Applicant Authority Type:: Inventor
Primary Citizenship Country::
Status:: Full Capacity
Given Name::
Middle Name::
Family Name::
Name Suffix::
City of Residence::
State or Province of Residence::
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Street of mailing address::
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Applicant Authority Type:: Inventor

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Status:: Full Capacity

Given Name::

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City of Residence::

State or Province of Residence::

Country of Residence::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 22910

Representative Information

Representative Customer Number:: 22910

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-Part of	09/410,129	09/30/99

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::